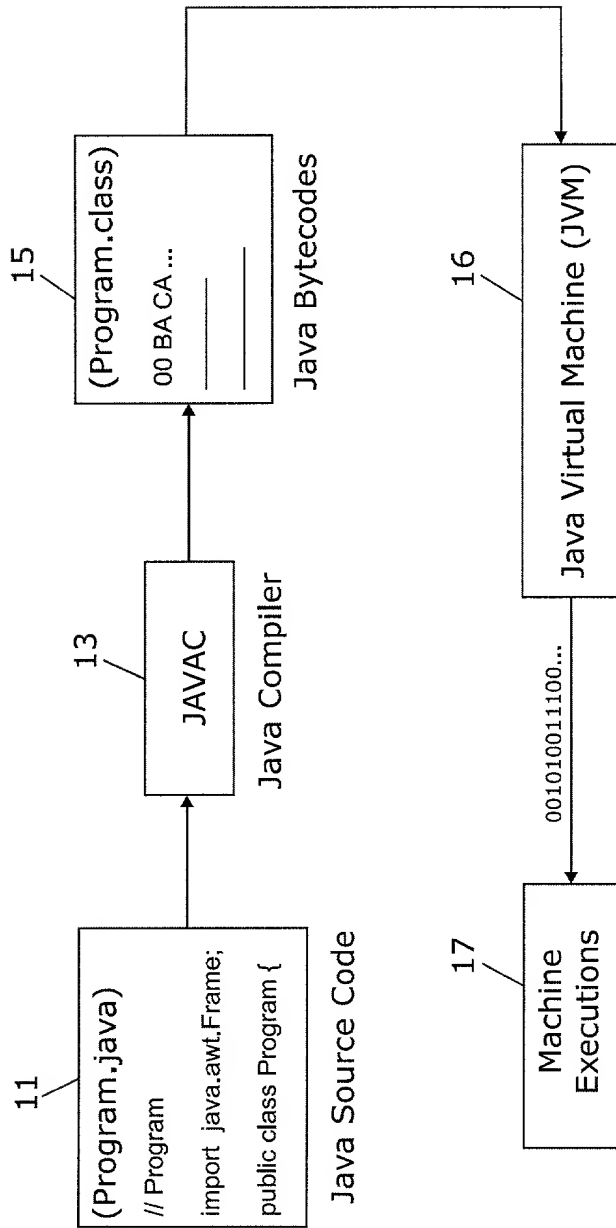
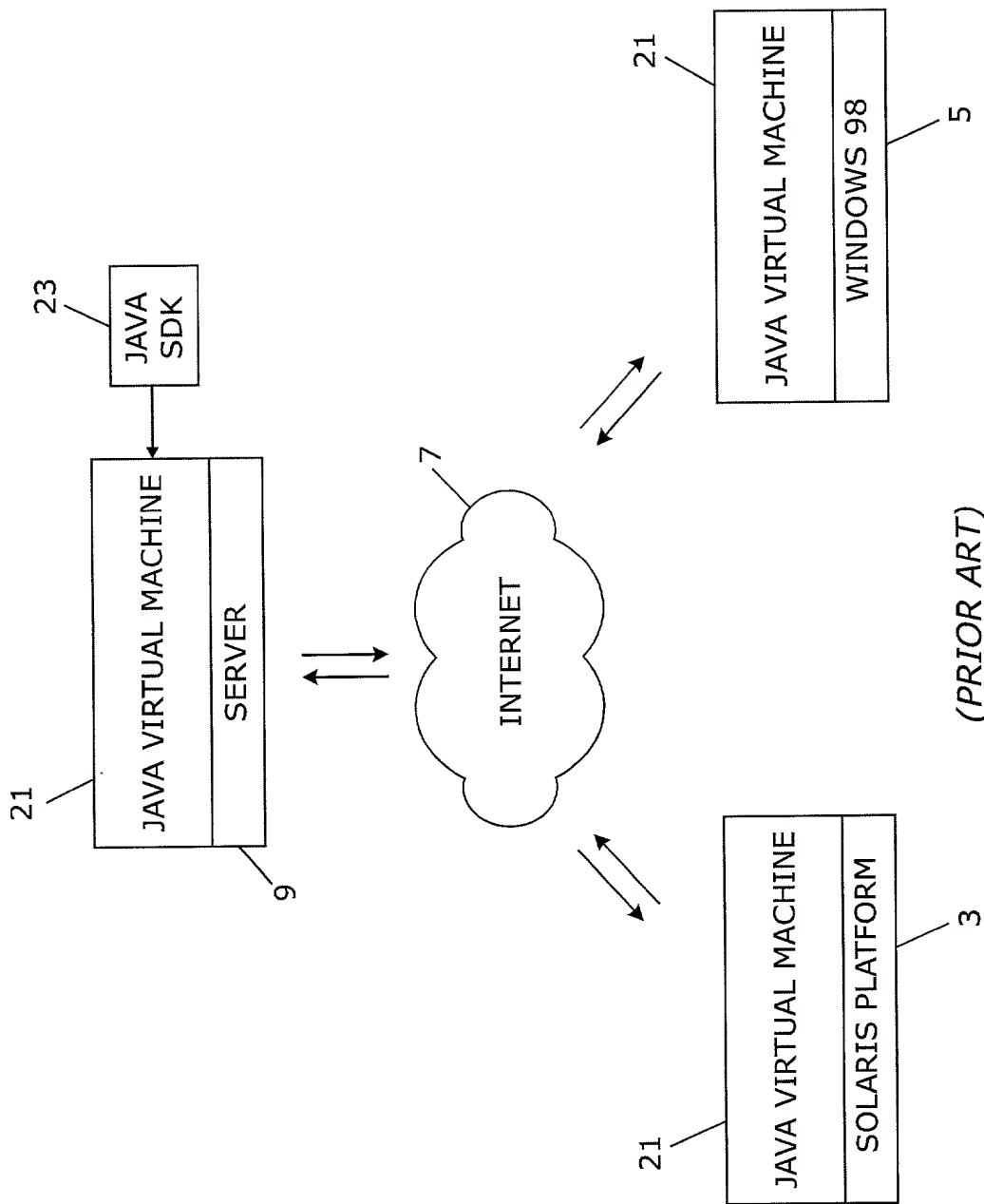


(PRIOR ART)
FIGURE 1



(PRIOR ART)
FIGURE 2



(PRIOR ART)
FIGURE 3

31

My Application

File Edit View Help

Subscription

File Edit View Help

ENTER YOUR INFORMATION BELOW:

PREFIX: ☐ MR ☐ MS ☐ DR] 41

NAME: 43

ADDRESS: 45

STATE: TX 47

YOU WISH TO RECEIVE (CHECK ALL THAT APPLY):

☒ BROCHURE

☒ EMAIL ☐ US MAIL] 51

☒ QUOTE

☐ EMAIL ☐ US MAIL ☒ TELEPHONE] 53

☐ OTHER

DESCRIBE 57

SUBMIT RESET 59

Provide Telephone Numbers

WORK NUMBER: 34

HOME PHONE: 66

CELL PHONE: 62

37 39 35 33 64 37 61

FIGURE 4 (PRIOR ART)

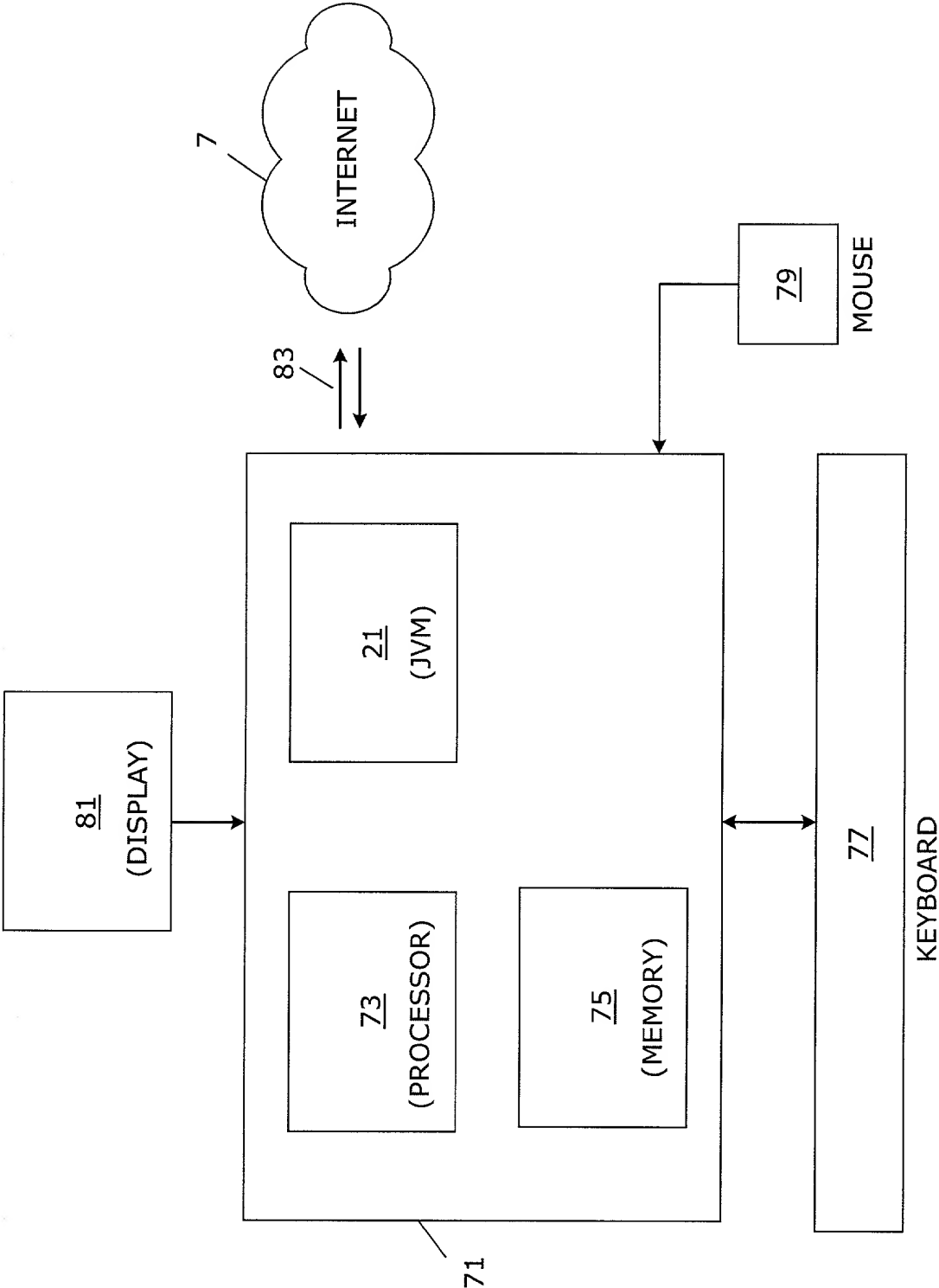


FIGURE 5

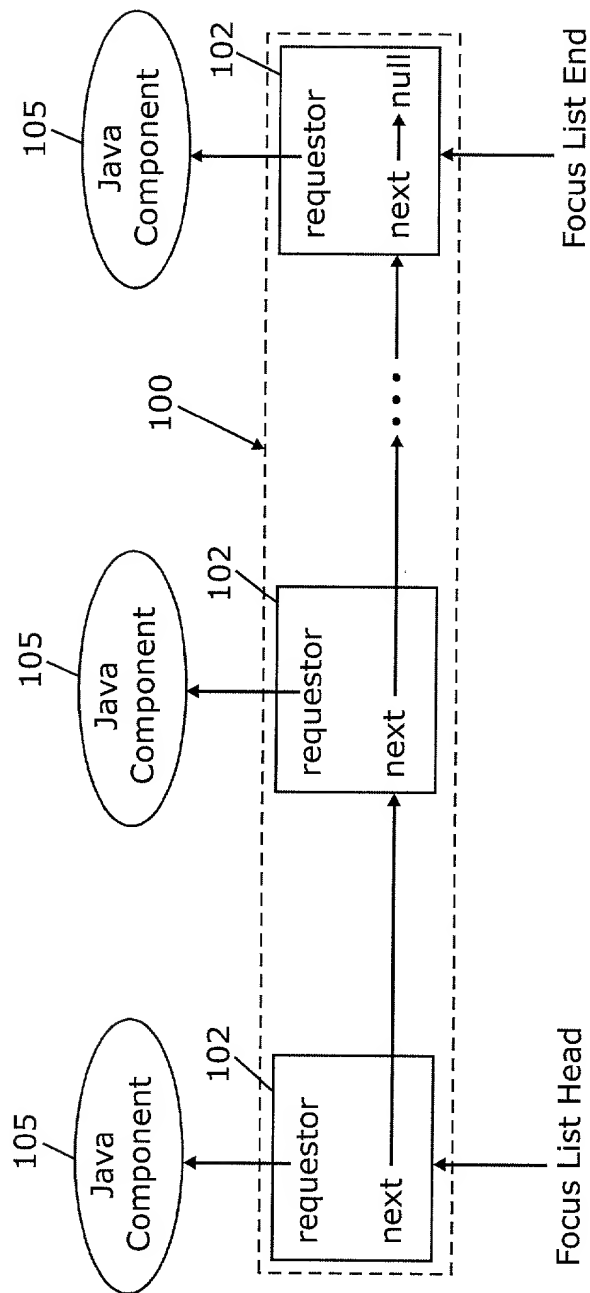


FIGURE 6

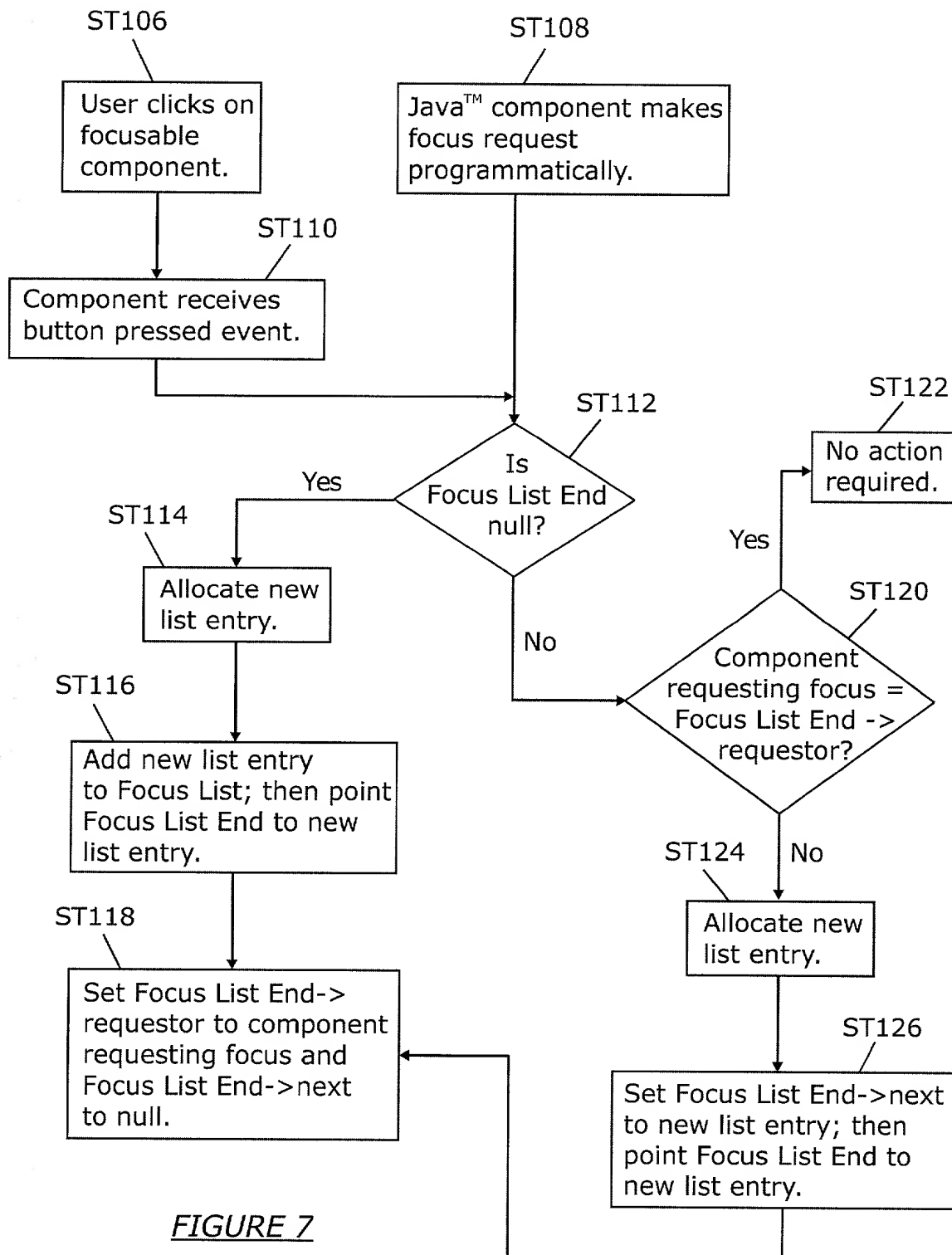


FIGURE 7

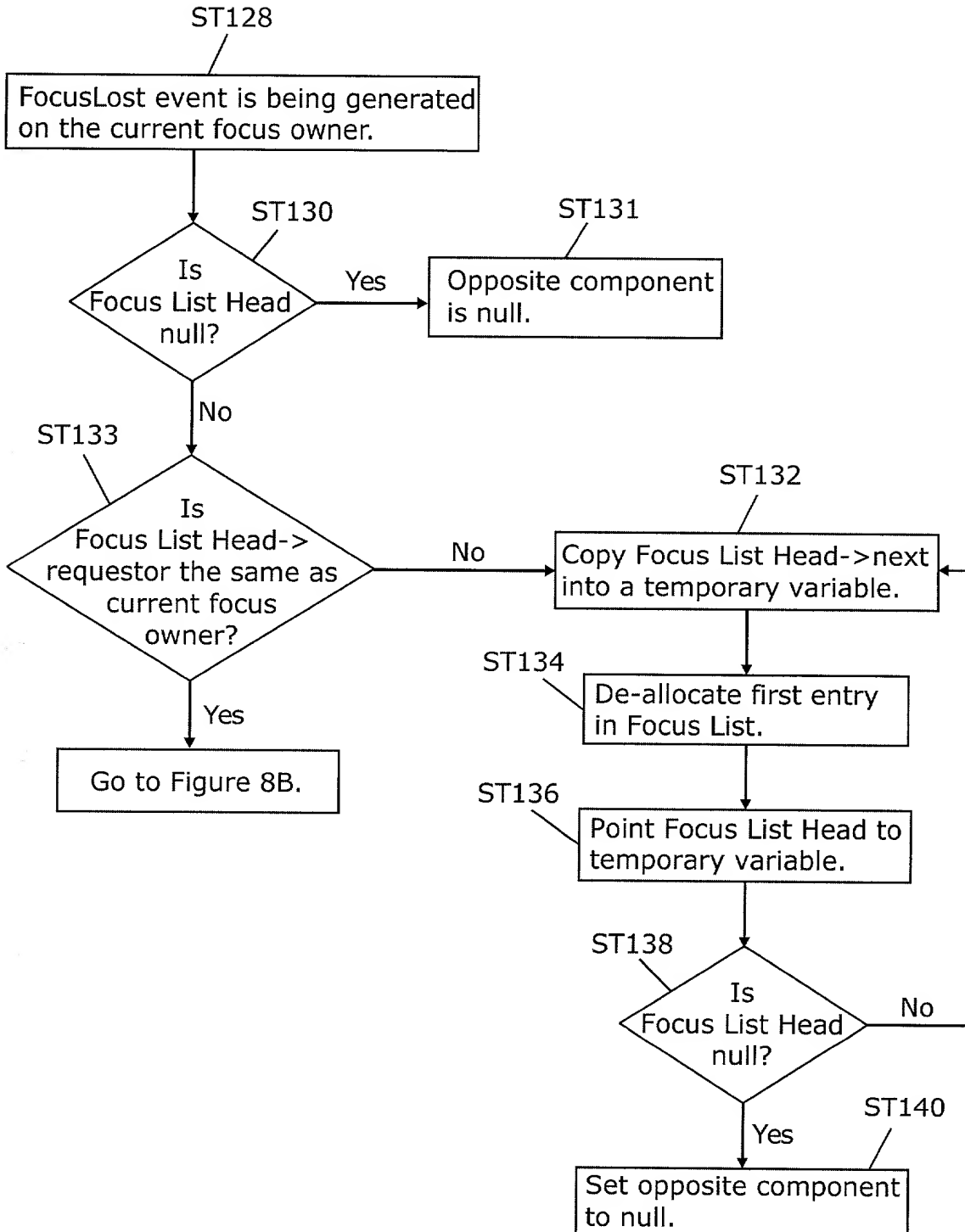
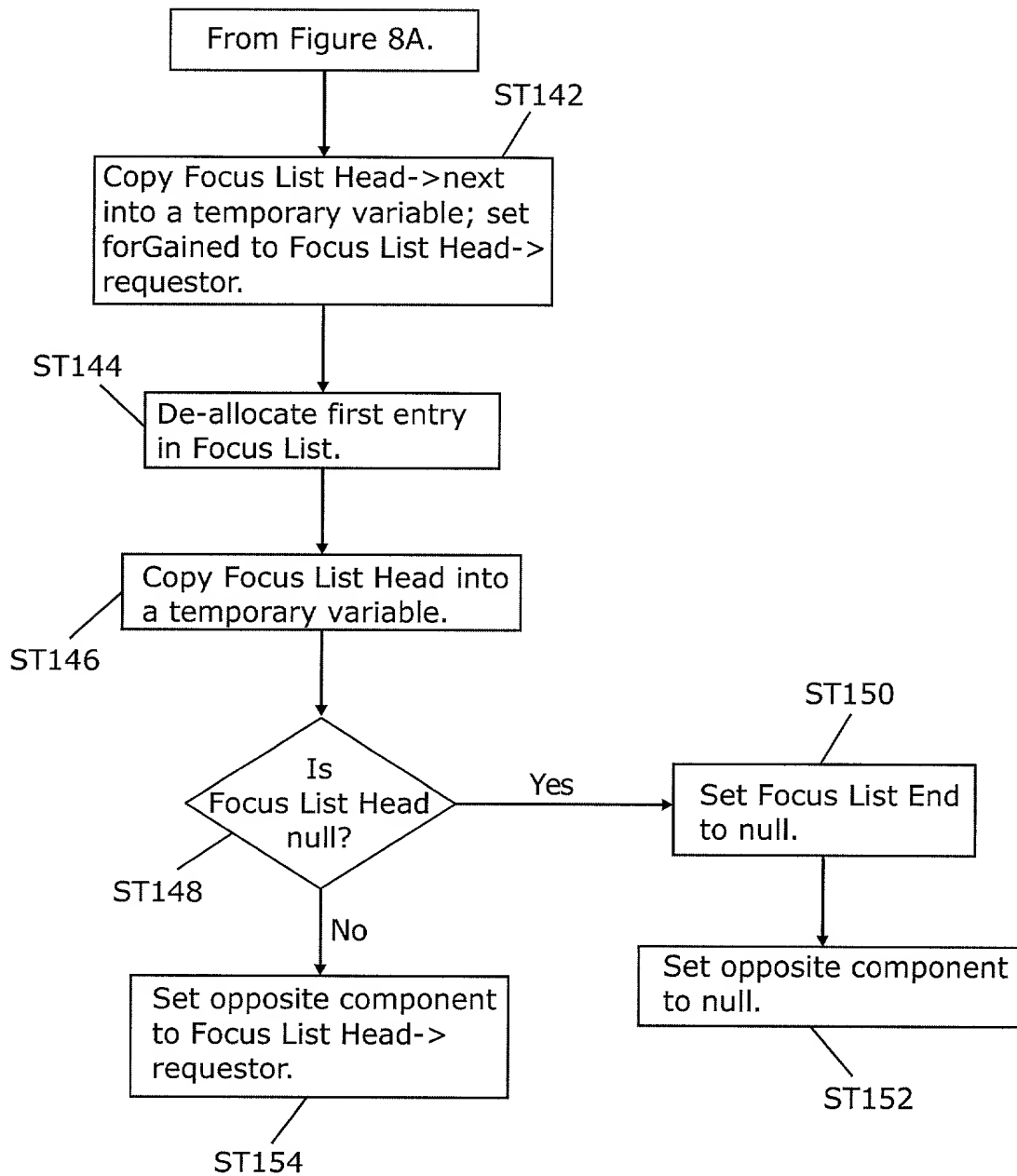
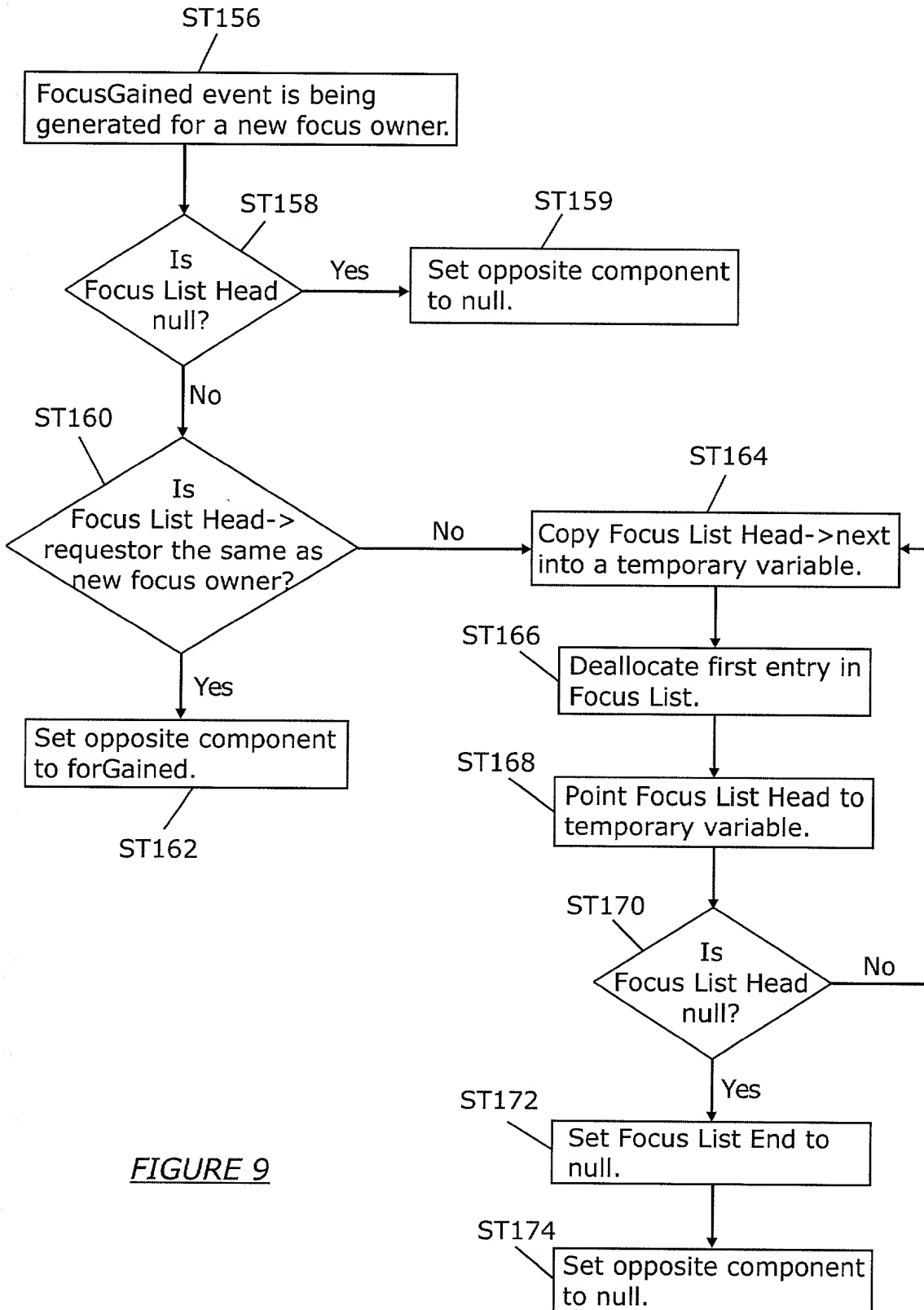


FIGURE 8A

*FIGURE 8B*

*FIGURE 9*